

11/09/01

J1130 U.S. PTO

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Please type a plus sign (+) inside this box ☐PTO/SB/05 (11-00)  
Approved for use through 10/31/2002. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	S100-DIV3
First Inventor	Greenberg
Title	Retinal Color Prosthesis For Color Sight Restoration
Express Mail Label No.	EL 516 675 962 US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents  
Box Patent Application  
Washington, D.C. 20231

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages **78**]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets **32**]
5. Oath or Declaration [Total Pages **4**]
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)
    - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s)  
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☒ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Citations
13. ☒ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122  
(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☒ Other: Petition to correct inventorship ...  
Declarations from Greenberg and Schulman

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☒ Divisional ☐ Continuation-in-part (CIP) of prior application No.: **09/515,373**Prior application information: Examiner **F. Oropeza**Group / Art Unit **3762**

For CONTINUING OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**☒ Customer Number or Bar Code Labelor ☐ Correspondence address below

(Insert Customer No. or Attach bar code label here)

Name	Second Sight, LLC				
Address	P.O. Box 905				
City	Santa Clarita	State	CA	Zip Code	91380-9005
Country	U.S.A.	Telephone	(661) 775-3995 ext. 3129	Fax	(661) 775-1595

Name (Print/Type) **Scott B. Dunbar**Registration No. (Attorney/Agent) **37,124**

Signature

Date

**11/8/07**

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# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

## Complete if Known

Application Number	--
Filing Date	--
First Named Inventor	Greenberg
Examiner Name	--
Group Art Unit	--
Attorney Docket No.	S100-DIV3

TOTAL AMOUNT OF PAYMENT \$1,517.00

## METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **50-0922**

Deposit Account Name **Second Sight, LLC**

☒ Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17

☒ Applicant claims small entity status. See 37 CFR § 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
101	201	370	Utility filing fee	370.00
106	206	165	Design filing fee	
107	207	255	Plant filing fee	
108	208	370	Reissue filing fee	
114	214	80	Provisional filing fee	
SUBTOTAL (1)				\$370.00

### 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
63	-20** = 43	9.00	387.00
Independent Claims	18 - 3** = 15	42.00	630.00
Multiple Dependent		0.00	0.00

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description
103	203	9	Claims in excess of 20
102	202	42	Independent claims in excess of 3
104	204	140	Multiple dependent claim, if not paid
109	209	42	** Reissue independent claims over original patent
110	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$1,017.00

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
105	205	65	Surcharge - late filing fee or oath	
127	227	25	Surcharge - late provisional filing fee or cover sheet	
139	239	130	Non - English specification	
147	247	2,520	For filing a request for ex parte reexamination	
112	212	920*	Requesting publication of SIR prior to Examiner action	
113	213	1,840*	Requesting publication of SIR after Examiner action	
115	215	55	Extension for reply within first month	
116	216	200	Extension for reply within second month	
117	217	460	Extension for reply within third month	
118	218	720	Extension for reply within fourth month	
128	228	980	Extension for reply within fifth month	
119	219	160	Notice of Appeal	
120	220	160	Filing a brief in support of an appeal	
121	221	140	Request for oral hearing	
138	238	1,510	Petition to institute a public use proceeding	
140	240	55	Petition to revive - unavoidable	
141	241	640	Petition to revive - unintentional	
142	242	640	Utility issue fee (or reissue)	
143	243	230	Design issue fee	
144	244	310	Plant issue fee	
122	222	130	Petitions to the Commissioner	130.00
123	223	50	Processing fee under 37 CFR § 1.17(q)	
126	226	180	Submission of Information Disclosure Statement	
581	281	40	Recording each patent assignment per property (times number of properties)	
146	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	279	370	Request for Continued Examination (RCE)	
169	269	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) \$130.00

## SUBMITTED BY

Name (Print/Type)	Scott B. Dunbar	Registration No. (Attorney/Agent)	37,124	Telephone	(661) 775-3995 ext. 3129
Signature		Date	11/8/07		

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**CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)**

Applicant(s): Greenberg, et al.

Docket No.

S100-DIV3

Serial No.

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Filing Date

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Examiner

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Group Art Unit

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Invention: **RETINAL COLOR PROSTHESIS FOR COLOR SIGHT RESTORATION**

I hereby certify that the following correspondence:

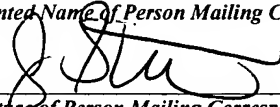
Divisional Patent Application

*(Identify type of correspondence)*

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11/9/01  
(Date)

Emily M. Stuart

*(Typed or Printed Name of Person Mailing Correspondence)*  
*(Signature of Person Mailing Correspondence)*

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